

**APPLICATION FOR DUPLICATE DRIVER'S LICENSE OR
NON-DRIVER ID CARD BY MAIL**
B-350 NEW 10-2006

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLES
MAIL OPERATIONS DIVISION - ROOM 305
60 STATE STREET, WETHERSFIELD CT 06161-5041
Phone Number: (860) 263-5148



INSTRUCTIONS

1. Only legal residents of Connecticut who are **temporarily** located out-of-state, out-of-country, or who are incarcerated may use this application. *(Please note: Your current Connecticut Driver's License must contain your photo/image in order to qualify for a mail transaction.)*
2. To request a duplicate of your current Connecticut license or ID Card **BY MAIL**, applicant must complete and sign this application. Please type or print clearly.
3. **MAIL** to the address shown above. *(Make checks payable to "DMV" - All funds must be in U.S. dollars drawn from a U.S. bank.)*

DMV VALIDATION ABOVE

APPLICATION FOR:

☐ **DUPLICATE LICENSE** (\$30.00)

☐ **DUPLICATE NON-DRIVER
IDENTIFICATION CARD** (\$15.00)

REASON FOR DUPLICATE:

☐ **LOST** ☐ **STOLEN** ☐ **DESTROYED**

NAME OF APPLICANT ON DRIVER'S LICENSE *(Last, First, Middle Initial)*

FORMER NAME IF RECENTLY CHANGED

DATE OF BIRTH

DRIVER'S LICENSE NUMBER *(if known)*

PHONE NUMBER WHERE YOU CAN BE CONTACTED

CONNECTICUT RESIDENT ADDRESS *(Number, Street, City or Town, State, Zip Code)*

MAILING ADDRESS *(If different from Connecticut resident address)*

ADDRESS WHERE LICENSE IS TO BE MAILED

SHOULD DMV CHANGE THE CURRENT
MAILING ADDRESS TO THE ADDRESS
WHERE THE LICENSE IS TO BE MAILED?

☐ **YES**
☐ **NO**

STATE THE REASON YOU CANNOT APPEAR AT DMV IN PERSON

☐ **OUT-OF-STATE** ☐ **OUT-OF-COUNTRY** ☐ **INCARCERATED** ☐ **OTHER** *(Explain):*

Your signature on this application attests, subject to penalties for false statement, that your driving privilege is not under suspension, that you do not have any health problems or conditions that prevent you from driving safely, that Connecticut is your legal residence or legal home-of-record, and that all information listed herein is true and accurate.

SIGNATURE OF OPERATOR

DATE SIGNED

X